# Advance Planning Document (APD) Phases for DDS Application Integration Project (AIP)

The overall APD process will be divided into four phases:

- Phase 1: Development of the Planning Advance Planning Document (PAPD) must describe in high level terms the desired integrated application environment DDS is planning. This PAPD will be submitted to CMS and, if approved, will require the subsequent development and submission of a more detailed IAPD.
- Phase 2: Development of the Implementation Advance Planning Document (IAPD) will describe more fully the technical development of the various applications and their interfaces within the department's IT architecture; discuss exploration and evaluation of alternative IT solutions to address DDS's needs; and provide extensive cost benefit analyses of the selected IT solution. The IAPD will be submitted to CMS and, if approved, will require the development and submission to CMS of a RFP to secure the Technical Vendor developer for the AIP.
- Phase 3: Technical Vendor RFP will be issued if the PAPD is approved by CMS and the funding requirements once proposed are approved by OPM. The issuance of the RFP will require closely coordinated work with CMS, CT Department of Information Technology (DOIT) and OPM to develop and issue the Technical Vendor RFP including development of criteria to evaluate potential Technical Vendors. Also included in this phase are RFP review, rating and selection of a Technical Vendor for the DDS AIP, as well as vendor contract development and negotiation.
- Phase 4: Implementation of the DDS AIP will include all application development, testing, deployment, debugging; independent validation, verification and quality oversight throughout design, development and implementation of the AIP.

The department will request services of a project management consultant who will be available though out the life cycle of this project. The initial request will be for phases 1&2, and if necessary CMS and OPM approvals and funding are secured at the end of Phase 2, DDS will seek additional consultant services for phases 3&4.

## Deliverables (Phase 1 &2):

## Project Work Plan for both PAPD and IAPD

The Project Manager will provide a work plan identifying a schedule for completing all duties and responsibilities included in this project. The work plan will identify tasks and subtasks necessary to successfully complete project deliverables. This will include development and submission of both the PAPD and IAPD. The work plan and deliverables may be adjusted and reallocated when mutually agreed upon through a new work plan that is signed by authorized parties for both the consultant and DDS, as long as the number of total days and dollars approved are not exceeded.

#### Phase 1 PAPD

# • PAPD Document

The Project Manager will provide consultation as needed on DDS draft PAPD re: scope, business and technical objectives, methodology, timelines; finalize the draft PAPD for submission to CMS, coordinate submission of the PAPD application to CMS and assist in responding to any CMS questions on this application.

## Phase 2 IAPD

## • Functional Requirements Document

The Project Manager will meet with DDS staff to define and develop the requirements definition. The Project Manager will provide the department with best practices and known, sound technologies to support the department's requirements. The Project Manager shall describe the process that will be used to gather input from DDS staff and provider community, and based on that input, develop a functional requirements document that describes all functions to be supported by the DDS AIP.

## • Cost Benefit Analysis Document

The Project Manager will identify costs and benefits relative to potential DDS AIP solutions that satisfy the Department's requirements, taking into consideration custom development vs. transferable solutions (from other states) vs. off the shelf IT solutions or a combination of these approaches. The Project Manager will also identify the costs and benefits to maintain the implemented solution in-house vs. outsourced. The Project Manager will also identify new processes or components of the DDS AIP that would be of benefit to the state.

## • Project Solution Document

The Project Manager must evaluate and propose a sound approach that will be both cost effective and efficient to satisfy the requirements of the DDS AIP. Consideration of both off the shelf and application development approaches should be included.

## • IAPD Documents

The Project Manager will incorporate the findings from all of the activities described above and include all federally mandated requirements for prior approval and subsequent submission. The Project Manager will coordinate submission of the IAPD application to CMS and assist in responding to any CMS questions on this application.

# Universal Features of All Applications Envisioned in DDS Applications Integration Project (AIP)

**Secure Web-based Applications** All applications will be web-based, i.e. accessible to all authorized users through a secure internet connection.

**Integrated Applications** All applications will be integrated so that data generated and updated in one application will automatically populate and be utilized by all other relevant applications. Historical records will maintained and archived.

**HIPAA secure environment** All applications and communication between and among authorized users will take place in a secure web based environment via a username and password. This will eliminate the need for the Tumbleweed solution for regular business users.

Role-based Access (DDS, private provider, families and consumers, other business associates) DDS staff, provider staff, families and consumers, as well as other business associates as applicable will have access only to the applications and only for those consumers and data that has been administratively authorized as appropriate based on their role and business function.

**Search Functionality** All applications will feature a search function by individual DDS # or consumer name as well as aggregate "caseload or equivalent." This will also accommodate searching for Providers and their related programs and services. Consumer data will be associated with Providers, services and service locations.

**Issues and Notification** All applications will have an issues tracking feature as deemed appropriate to the application function, with notification to relevant users. Issues tracking will interface closely with the remediation feature.

**Remediation and Verification** All applications will provide a means to develop remediation plans to open issues, and track and verify completion of remediation for individual issues and aggregation of data.

**Document Management** The Application Integration Project will also feature document management services, i.e. role based access to scanned and electronically stored and cataloged documents such as consumer evaluations and clinical reports.

Reports Management All applications will be further enhanced by standard report functions for each individual application and cross functionally with other applications in this integrated system. The integrated nature of this IT system will allow for production of reports across various data sets without the need to create separate downloads from various data bases. This will also include the ability to create ad hoc reports as needed and may include data extracts for Provider use. All reports will be produced as pdf files which can be saved and emailed.

# Advance Planning Document—Integrated Application Project Application Overview

All applications will operate within the existing DDS IT architecture and universal application features.

## DDS Client Eligibility

• Eligibility database tracks eligibility application status, decisions, and appeals.

#### Assessment

 <u>Level of Need (LON)</u> database to conduct LON assessments for determination of consumer level of supports based on individual need. Identifies risk areas for planning and serves as basis for resource allocation

## Consumer Planning

- <u>Individual Planning (IP)</u> electronic record for DDS consumers' individual plan goals, objectives, action plans, and periodic reviews.
- <u>Clinical Support Services</u> electronic record for DDS consumers' health and behavior support plans
- Case Notes database for case manager, nurse and behavior support staff case notes
- <u>Electronic Case File</u> electronic file of consumers' various documents, evaluations, reports, etc. that are scanned and cataloged into system replacing current paper case record.

#### Resource Allocation

- <u>Planning and Resource Allocation (PRAT)</u> database tracks and calculates individual resource allocation based on LON score. Service allocation functions apply to requests for both new and additional services
- Waiver Management database tracks waiver enrollment of DDS consumers and monitors enrollment status including annual renewal of eligibility.

## Continuous Quality Improvement/Service Evaluation Processes

- Medication Administration Certification database tracks certification and re-certification status of all public and private personnel certified to administer medications as well as status of trained non-licensed staff.
- Quality Service Review (QSR) database to schedule and conduct quality reviews of consumers' services at individual and provider levels. Includes ability to remediate/follow up on quality indicators that are not met and close open issues. QSR serves as the basis for provider certification.
- <u>Licensing and Certification</u> database to track licensing/certification status for all providers.
- <u>PRC/HRC (Program Review/Human Rights)</u> database to track status of Program Review/Human Rights approvals, qualifications, periodic reviews, Tardive Dyskinesia screenings.
- <u>Incident Management</u> database for dispersed incident data entry; development and tracking of follow-up action plans. Includes all categories of incidents—critical incidents, abuse neglect, death reporting.

## Service Management and Budgeting

• IP-6 database for section 6 (the budget/service description) of the Individual Plan to automate the overall budgeting function based on individual consumer allocations for approved services. It will allow case managers to develop budgets and any subsequent modifications based on changing needs specified in the consumer's IP, authorize services, and manage ongoing expenditures of the approved budget. The application will track consumer placements/services not funded by DDS. Also included are features a service management function consisting of a master catalog of available services and providers who are qualified to provide these services.

## Documentation of Service Delivery and Billing

• Web Res/Day database to automate billing information on services delivered and document the delivery of those services (scope, type, frequency and duration) within the budgeted funds and service units. Application will provide a means to reconcile a consumer's allocated services with actual delivery and show progress towards meeting identified IP goals. Fiscal Intermediary (FI) billing data are also included in the application.

# **Emergency Management**

• Will continue to be an up-to-date database that is extracted from the data "warehouse" and is available off-line, in the event the web/network system is not functioning during an emergency event.

# **DDS Integrated Application Environment** Future Vision to Support HCBS Waiver

November 2010

Universal Features

